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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032  
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<p style="text-align: center;"><b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small></p>		Attorney Docket No. <b>520.42912X00</b>																																											
		First Inventor <b>TANIGUCHI, YO</b>																																											
		Title	<b>INSPECTION APPARATUS USING NUCLEAR MAGNETIC RESONANCE</b>																																										
		Express Mail Label No.																																											
<b>APPLICATION ELEMENTS</b> <i>SEE MPEP chapter 600 concerning utility patent application contents.</i>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231																																											
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages: <b>52</b>] <i>(Preferred arrangement set forth below)</i> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R &amp; D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Pages: <b>9</b>]</p> <p>5. Oath or Declaration [Total Pages: <b>4</b>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>																																													
<p>17 437 U S PTO 10/614019 07/08/03</p> <p><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; documents(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other: <b>Figs. 1-12, Credit Card Payment Form, List and Copies of Prior Art</b></p>																																													
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation    <input type="checkbox"/> Divisional    <input type="checkbox"/> Continuation-in-part (CIP)    of prior application No.: _____</p> <p>Prior application information: Examiner: _____ Group Art Unit: _____</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p><b>19. CORRESPONDENCE ADDRESS</b></p> <table border="1"><tr><td colspan="2"><input checked="" type="checkbox"/> Customer Number or Bar Code Label</td><td colspan="2">020457 <i>(Insert Customer No. or Attach bar code label here)</i></td><td colspan="2">or <input type="checkbox"/> Correspondence address below</td></tr><tr><td colspan="2">Name</td><td colspan="4">ANTONELLI, TERRY, STOUT &amp; KRAUS, LLP</td></tr><tr><td colspan="2">Address</td><td colspan="4"></td></tr><tr><td colspan="2">City</td><td>State</td><td></td><td>Zip Code</td><td></td></tr><tr><td colspan="2">Country</td><td>Telephone</td><td>(703) 312-6600</td><td>Fax</td><td>(703) 312-6666</td></tr><tr><td>Name</td><td colspan="3">Melvin Kraus</td><td>Registration No. (Attorney/Agent)</td><td>22,466</td></tr><tr><td>Signature</td><td colspan="3"><i>Melvin Kraus</i></td><td>Date</td><td>July 8, 2003</td></tr></table>				<input checked="" type="checkbox"/> Customer Number or Bar Code Label		020457 <i>(Insert Customer No. or Attach bar code label here)</i>		or <input type="checkbox"/> Correspondence address below		Name		ANTONELLI, TERRY, STOUT & KRAUS, LLP				Address						City		State		Zip Code		Country		Telephone	(703) 312-6600	Fax	(703) 312-6666	Name	Melvin Kraus			Registration No. (Attorney/Agent)	22,466	Signature	<i>Melvin Kraus</i>			Date	July 8, 2003
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Burden Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)**1,480.00****Complete if Known**

Application Number	
Filing Date	July 8, 2003
First Named Inventor	TANIGUCHI, YO
Examiner Name	
Art Unit	
Attorney Docket No.	520.42912X00

**METHOD OF PAYMENT** (check all that apply) Check  Credit Card  Money Order  Other  None Deposit Account:

Deposit Account Number 01-2135

Deposit Account Name Antonelli, Terry, Stout &amp; Kraus, LLP

The Commissioner authorized to: (check all that apply)

Charge fees indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fees indicated below, except for the filing fee to the above-identified deposit account.

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1001	750	2001 375 Utility filing fee	750.00
1002	330	2002 165 Design filing fee	
1003	520	2003 260 Plant filing fee	
1004	750	2004 375 Reissue filing fee	
1005	160	2005 80 Provisional filing fee	
<b>SUBTOTAL (1)</b>			750.00

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
21	-20** = 1	x 18	= 18.00
Indep. Claims	11	-3** = 8	x 84 = 672.00
Multiple Dependent		280	= 0

Large Entity Fee Code	Small Entity Fee Code	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	84	2201 42 Independent claims in excess of 3
1203	280	2203 140 Multiple dependent claim, if not paid
1204	84	2204 42 ** Reissue independent claims over original patent
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2) \$ 690.00</b>		

\*\* or number previously paid, if greater. For Reissues, see above.

3. ADDITIONAL FEES			
Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1051	130	2051 65 Surcharge – late filing fee or oath	
1052	50	2052 25 Surcharge – late provisional filing fee or cover sheet	
1053	130	1053 130 Non-English specification	
1812	2,520	1812 2,520 For filing a request for ex parte reexamination	
1804	920*	1804 920* Requesting publication of SIR prior to Examination action	
1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
1251	110	2251 55 Extension for reply within first month	
1252	410	2252 205 Extension for reply within second month	
1253	930	2253 465 Extension for reply within third month	
1254	1,450	2254 725 Extension for reply within fourth month	
1255	1,970	2255 985 Extension for reply within fifth month	
1401	320	2401 160 Notice of Appeal	
1402	320	2402 160 Filing a brief in support of an appeal	
1403	280	2403 140 Request for oral hearing	
1451	1,510	1451 1,510 Petition to institute a public use proceeding	
1452	110	2452 55 Petition to revive – unavoidable	
1453	1,300	2453 650 Petition to revive – unintentional	
1501	1,300	2501 650 Utility issue fee (or reissue)	
1502	470	2502 235 Design issue fee	
1503	630	2503 315 Plant issue fee	
1406	130	1460 130 Petitions to the Commissioner	
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)	
1806	180	1806 180 Submission of Information Disclosure Stmt	
8021	40	8021 40 Recording each patent assignment per property (times number of properties)	40.00
1809	750	2809 375 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810 375 For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801 375 Request for Continued Examination (RCE)	
1802	900	1802 900 Request for expedited examination of a design application	
Other fee (specify) _____			

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$ 40.00)****SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Malvin Kraus	Registration No. (Attorney/Agent)	22,468	Telephone	703-312-6600
Signature	<i>Malvin Kraus</i>		Date	July 8, 2003	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.